USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice

United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF			COURT CASE NUMI	BER 330		
United States of America			Misc No. 2: 5 8	- MC - 3380	1- MK	
DEFENDANT				TYPE OF PROCESS		
Don Moore			11	Application Instructions, Notice, Writ		
NAME OF INDIVIDUAL, COMPANY, CORPORAT	TION. ETC. T	O SERVE OR DES	CRIPTION OF PROPERTY T	O SEIZE OR CON	DEMN	
SERVE AT Don Moore ADDRESS (Street or RFD, Apartment No., City, State)	e and ZIP Coa	le)	- 141			
100 Jackson Street, Wetumpka, AL 36092		,				
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AN	ID ADDRESS	BELOW	Number of process to be			
	<u> </u>		served with this Form 285		4	
U.S Attorney Office RETURNED Attn: M. Tunnell PO Box 197	AND F	ILED	Number of parties to be served in this case		2	
Montgomery, AL 36101 JAN 1	7 2008		Check for service on U.S.A.			
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WIL	L ASSIST IN	EXPEDITING SER	RVICE (Include Business and	Alternote Addresse	<u> 25,</u>	
All Telephone Numbers, and Estimated Times Available for Services: Sold U.S. DISTR MIDDLE DIS	COU	RT A.			50 COLOR	
				>		
			TEX EDITONE NUMBER	DATE	1	
Signature of Attorney other Originator requesting service on behalf of:		JAINTIFF	TELEPHONE NUMBER			
	D	EFENDANT	334-223-7280	1/8/98		
SPACE BELOW FOR USE OF U.S. MARSI	HAL ON	LY DO NO	T WRITE BELOW	THIS LIN	E	
	rve	Signature of Authori	ized USMS Deputy or Clerk	Date	'14]	
I hereby certify and return that have personally served, have leg on the individual, company, corporation, etc., at the address shown above	gal evidence o	of service, have e e individual, compa	executed as shown in "Remark my, corporation, etc. shown at t	s", the process describe address inserted	cribed l below.	
I hereby certify and return that I am unable to locate the individual,	company, corp	poration, etc. named	above (See remarks below)			
Name and title of individual served (if not shown above)			1 —	itable age and discre n defendant's usual p		
Address (complete only different than shown above)			Date	Time		
EYE MART EXPRESS 6520 Atlanta Hwy Mont. Alabama. 36117			1/16/2008	0930	≥ an □ pn	
6520 Atlanta Hwy			Signature of U.S. M	larshal or Depoty		
Service Fee Total Mileage Charges Forwarding Fee including endeavors)	Charges	Advance Deposits	Amount owed to U.S. Marsi (Amount of Refund*)	hal* or		
	2.76		Variount of stolator)	4	\$0.00	
REMARKS:			1			

PRINT 5 COPIES:

- 1. CLERK OF THE COURT
- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 12/15/80 Automated 01/00